# ChemComm

# Accepted Manuscript



This is an *Accepted Manuscript*, which has been through the Royal Society of Chemistry peer review process and has been accepted for publication.

Accepted Manuscripts are published online shortly after acceptance, before technical editing, formatting and proof reading. Using this free service, authors can make their results available to the community, in citable form, before we publish the edited article. We will replace this Accepted Manuscript with the edited and formatted Advance Article as soon as it is available.

You can find more information about *Accepted Manuscripts* in the **Information for Authors**.

Please note that technical editing may introduce minor changes to the text and/or graphics, which may alter content. The journal's standard <u>Terms & Conditions</u> and the <u>Ethical guidelines</u> still apply. In no event shall the Royal Society of Chemistry be held responsible for any errors or omissions in this *Accepted Manuscript* or any consequences arising from the use of any information it contains.



www.rsc.org/chemcomm



## ChemComm

## COMMUNICATION

### How cocrystals of weakly basic drugs and acidic coformers might modulate solubility and stability

G. Kuminek,<sup>a</sup> N. Rodríguez-Hornedo,<sup>a</sup> S. Siedler,<sup>b</sup> H. V. A. Rocha,<sup>c</sup> S. L. Cuffini<sup>b,d</sup> and S. G. Cardoso<sup>b</sup>

Received 00th January 20xx, Accepted 00th January 20xx

DOI: 10.1039/x0xx00000x

www.rsc.org/

Cocrystals of a weakly basic drug (nevirapine) with acidic coformers are shown to alter the solubility dependence on pH, and to exhibit a  $pH_{max}$  above which a less soluble cocrystal becomes more soluble than the drug. The cocrystal solubility advantage can be dialed up or down by solution pH.

Cocrystals can increase drug solubilities by orders of magnitude, yet such enhancement can be thwarted by the extent of ionization<sup>1-3</sup> and solubilization<sup>4-7</sup> of cocrystal components. For this reason cocrystal solubility only makes sense in light of solution conditions, such as pH (ionization) and additives (solubilizing agents). The present work shows (1) how solubility and thermodynamic stability of cocrystals can change with solution pH, and (2) best and rapid approaches to characterize such behavior.

NVP is a non-nucleoside reverse transcriptase inhibitor (NNRTI)<sup>8</sup> used in the treatment of HIV-1 infections. NVP is a lipophilic molecule that exhibits poor oral bioavailability due to dissolution rate limited absorption.9 Formation of NVP cocrystals as a means to enhance aqueous solubilities relative to the pure crystalline drug was recently investigated by Caira et al. <sup>10</sup> Several NVP cocrystals with acidic coformers, maleic acid (MLE), saccharin (SAC) and salicylic acid (SLC), among others, were discovered. The authors of this fine publication observed that dissolution studies failed to reveal the expected increases in cocrystal solubility, based on high coformer to drug solubilities; a trend that our group has confirmed for other cocrystals.<sup>11</sup> This motivated us to investigate the reasons for such unexpected findings, and gain a deeper understanding of how these cocrystals work. Chemical structures and  $pK_a$  values of drug and coformers in the cocrystals we studied are summarized in Table 1.

The influence of pH on cocrystal solubility has not generally been recognized and very few articles report the pH associated with cocrystal dissolution and solubility measurements<sup>1, 3, 6, 7, 12</sup>. Cocrystals of a basic drug and an acidic coformer will encounter solution conditions under which the drug and/or coformer may be ionized. Since cocrystal solubility is primarily influenced by the sum of all the cocrystal constituent species in solution (ionized and nonionized, in this case), pH is expected to be a crucial factor in determining such cocrystal solubilities.

Fig. 1 shows the solubility of NVP and its cocrystals as a function of pH. These results demonstrate that cocrystals change the solubility vs pH curve from an exponential decrease leading to a constant low value for NVP, to a "U shaped" curve with exponentially decreasing and increasing solubilities for its cocrystals. NVP is highly soluble at pH < 3, but its solubility decreases by about 2 orders of magnitude

Table 1. Chemical structures and pK<sub>a</sub> values of drug and coformers.



<sup>&</sup>lt;sup>a.</sup> Department of Pharmaceutical Sciences, University of Michigan, Ann Arbor, MI, United States. E-mail: nrh@umich.edu

<sup>&</sup>lt;sup>b.</sup> Quality Control Laboratory, Post Graduate Program in Pharmacy, Universidade Federal de Santa Catarina, Florianópolis, Brazil.

<sup>&</sup>lt;sup>c.</sup> Laboratory of Advanced Pharmaceutical Systems, Farmanguinhos, Fundação Oswaldo Cruz, Rio de Janeiro, RJ, Brazil.

<sup>&</sup>lt;sup>d.</sup> Institute of Science and Technology, Post Graduate Program in Materials Science and Engineering, Universidade Federal de São Paulo, São Paulo, SP, Brazil.

Supplementary Information (ESI) available: Experimental details and solubility data. See DOI: 10.1039/x0xx00000x

Journal Name



Fig. 1 Solubility of the basic drug NVP and its cocrystals with acidic coformers: (1:1) cocrystal NVP-MLE, and (2:1) NVP-SAC and NVP-SLC as a function of pH. Symbols represent solubilities determined from solutions saturated with NVP and/or cocrystal at 25°C. pH values correspond to equilibrium pH. The pH value at the intersection of the drug and cocrystal (NVP-SAC and NVP-SLC) solubility curves corresponds to  $pH_{max}$  or transition point above which a less soluble cocrystal becomes more soluble than drug. Curves were calculated from cocrystal and drug solubility-pH dependence according to equations 1 and 2 and parameter values presented in the text and in table 2. Symbols represent: NVP solubility (NVP hydrate-open circles, NVP anhydrous-filled circles) and cocrystal solubilities from eutectic points (squares).

(pH 1 to 4) to a constant low solubility value of approximately 0.2mM at pH > 4. Cocrystals on the other hand, show a solubility decrease (pH 1 to 3) and a solubility increase at pH>3. Some cocrystals also exhibit a transition point or pH<sub>max</sub> at the intersection of the drug and cocrystal solubility curves. This means that cocrystals will exhibit higher solubilities than drug at pH > pH<sub>max</sub>.

Solubility-pH relationships are well recognized for acids and bases, and their corresponding salts<sup>16-18</sup>. NVP is a weak base and its solubility as a function of pH is described by

$$S_{drug} = S_{drug0} \left( 1 + 10^{pK_{a,drug} - pH} \right)$$
(1)

where  $S_{drug,0}$  represents the solubility of NVP under nonionizing conditions, 0.172mM at 25°C.  $K_a$  represents the ionization constant of NVP conjugate acid. This equation shows that the simultaneous measurement of solubility and pH allows for calculation of solubility at other pH values.

Cocrystal solubility is the sum of all the cocrystal component species in solution that are in equilibrium with the cocrystal. Theoretical solubility-pH relationships for NVP cocrystals can therefore be derived, by considering the two relevant equilibria from which the concentration of cocrystal component species can be obtained. The first is the cocrystal dissolution/dissociation equilibrium defined by a solubility product,  $K_{sp}$ , and the second involves the ionization of drug and coformer characterized by their respective ionization

constants, K<sub>a</sub>. Derivation of cocrystal solubility equations is presented in the ESI<sup>+</sup>. The solubility expression is then obtained by considering the mass balance of each cocrystal component (ionized and unionized species) to give

$$S_{cc}^{1:1} = \sqrt{K_{sp} \left(1 + 10^{pK_{a,D} - pH}\right)} \times \sqrt{\left(1 + 10^{pH - pK_{a1,CF}} + 10^{2pH - pK_{a1,CF} - pK_{a2,CF}}\right)}$$
(2)

for the 1:1 cocrystals with diprotic acidic coformers. Subscripts D and CF represent drug and coformer. For 2:1 cocrystals with monoprotic acidic coformers, the solubility equation becomes

$$S_{cc}^{2:1} = 2 \sqrt[3]{\frac{K_{sp}}{4} \left(1 + 10^{pK_{a,D} - pH}\right)^2 \left(1 + 10^{pH - pK_{a1,CF}}\right)}$$
(3)

Cocrystal solubility in the above equations is expressed in terms of moles of drug, unless otherwise indicated.

Excellent agreement between measured and predicted cocrystal solubilities in Fig. 1, demonstrates that these equations predict how pH might influence cocrystal solubility from knowledge of cocrystal  $K_{sp}$ , and  $K_a$  values of its components. Cocrystal  $K_{sp}$  values in this work were determined from cocrystal solubility measurements under equilibrium conditions at the cocrystal/NVP hydrate eutectic points unless otherwise indicated.

Caira et al.<sup>10</sup> characterized cocrystal solubilities from cocrystal dissolution in water. Our solubility studies suggest that the unexpectedly moderate cocrystal solubility increases ( $S_{cc}/S_{drug}$ ) reported by Caira et al.<sup>10</sup> (Table 2) are due to the sensitivity of cocrystal solubility on pH, and to possible transformation of cocrystals to NVP. As shown in Fig. 1, NVP cocrystal solubilities can: (1) vary by orders of magnitude with pH, and (2) approach drug solubility as pH approaches pH<sub>max</sub>.

Table 2 Nevirapine cocrystals: K<sub>sp</sub>, pH<sub>max</sub>, and S<sub>cc</sub>/S<sub>drug</sub>.

Cocrystal	$K_{sp}^{a}$ (M <sup>2</sup> or M <sup>3</sup> ) <sup>b</sup>	pH <sub>max</sub> <sup>c</sup>	S <sub>cc</sub> /S <sub>drug</sub> <sup>d</sup> pH 1 to 5	S <sub>cc</sub> /S <sub>drug</sub> <sup>e</sup> pH ?
NVP-MLE (1:1)	1.96 × 10 <sup>-5</sup>	none	3.4–906	5.3
NVP-SAC (2:1)	$1.05 \times 10^{-10}$	1.1	0.9–47	1.4
NVP-SLC (2:1)	3.63 × 10 <sup>-11</sup>	1.7	0.6–11	1.1

(a) Calculated from equilibrium solubility measured at cocrystal/drug eutectic points at 25°C described in ESI<sup>+</sup>. (b) Units of M<sup>2</sup> for 1:1 and M<sup>3</sup> for 2:1 cocrystals. (c) Obtained from the intercept of drug and cocrystal solubility curves in Fig. 1. (d) Obtained from equilibrium solubility calculation, S vs pH curves in Fig. 1. (e) From Caira et al., <sup>10</sup> obtained from cocrystal dissolution in water, pH unknown, and NVP solubility in water (0.36mM) at 37°C. The influence of temperature on S<sub>cc</sub>/S<sub>drug</sub> is expected to be small compared to the influence of pH. S<sub>drug</sub> hydrate increases by about 2 fold between 25 and 37°C<sup>19</sup> and the change in S<sub>cc</sub>/S<sub>drug</sub> may be even smaller if at all.

#### **Journal Name**

The  $S_{cc}/S_{drug}$  reported by Caira et al.<sup>10</sup> is highest for the NVP-MLE with a value around 5. We found that this cocrystal is the most soluble of the three cocrystals we studied and does not have a pH<sub>max</sub>. In addition,  $S_{cc}/S_{drug}$  is hugely dependent on pH with a value of 3 at pH 1, 20 at pH 2, and 900 at pH 5. Having the most soluble coformer at the highest molar ratio (1:1) appears to contribute to the high solubility of this cocrystal.

The S<sub>cc</sub>/S<sub>drug</sub> values for NVP-SAC and NVP-SLC cocrystals were lower than for NVP-MLE, consistent with our findings. Furthermore, the reported<sup>10</sup> S<sub>cc</sub>/S<sub>drug</sub> values were around 1, suggesting the proximity of solution pH to pH<sub>max</sub>. We discovered that these cocrystals have pH<sub>max</sub> values of 1.1 and 1.7 where S<sub>cc</sub>/S<sub>drug</sub> = 1. Without knowledge of the pH or pH<sub>max</sub>, the increase in solubility that these cocrystals impart could be missed. We observed that dissolution of these three cocrystals lowered solution pH as the acidic coformer concentrations increased (as shown by the decrease in initial pH as solutions reached equilibrium). For these reasons it is essential to measure the pH associated with cocrystal solubility or dissolution studies.

It is important to note that  $S_{cc}$  values determined by kinetic methods are generally lower than those measured by equilibrium methods used in our work, as a result of the cocrystal conversion to the constituent drug during dissolution.  $S_{cc}/S_{drug}$  values determined from eutectic point measurements are equilibrium values and provide a supersaturation index. This means that the huge increase in  $S_{cc}/S_{drug}$  with pH translates to very high supersaturation with respect to the less soluble drug, leading to more favorable and faster conversions to drug. While the higher  $S_{cc}/S_{drug}$  values may not be experimentally reached they give insight as to the conversion rates that a cocrystal might experience and inform dissolution and cocrystal formulation approaches.

We have previously demonstrated the importance of the eutectic constant,  $K_{eu}$ , as a key indicator of cocrystal to drug solubility, and as an experimentally accessible equilibrium state regardless of the cocrystal solubility relative to pure components.<sup>2, 20</sup> Keu is defined as

$$K_{eu} \equiv \frac{[coformer]_{eu,total}}{[drug]_{eu,total}}$$
(4)

at the eutectic point where drug and cocrystal are in equilibrium with solution. The terms in brackets represent concentrations. Subscripts eu and total are analytical concentrations (ionized+nonionzed) at the eutectic point.

 $K_{eu}$  values above cocrystal stoichiometric ratio, indicate that the cocrystal is more soluble than the drug, and the opposite for cocrystals that are less soluble than drug. For the purpose of initially evaluating the NVP cocrystal to drug solubility and stability, we determined  $K_{eu}$  values from measured eutectic concentrations of coformer and drug as shown in Fig. 2. Studies were done at 25°C and pH values between 1 and 4 (Fig. 2). Higher pH values could not be reached due to buffering by the acidic coformers.

For the 1:1 NVP-MLE cocrystal,  $K_{eu} > 1$  at all pH values studied indicating that the cocrystal is more soluble than the



Nevirapine Maleic acid



Fig. 2 Eutectic concentrations of drug and coformer at different pH values are key indicators of cocrystal thermodynamic stability relative to drug. a) NVP-MLE (1:1), b) NVP-SAC (2:1), and c) NVP-SLC (2:1). NVP-MLE cocrystal is more soluble than NVP as suggested by  $K_{eu} > 1$ , [coformer]<sub>eu</sub> > [drug]<sub>eu</sub>. SAC and SLC cocrystals have a reversal in this trend as pH increases,  $K_{eu} < or > 0.5$ , indicating a transition point at pH<sub>max</sub>. pH values represent equilibrium values and are generally lower than initial pH.

drug since  $S_{cc}/S_{drug} > 1$ . This cocrystal does not have a  $pH_{max}$  where  $K_{eu} = 1$ .

For 2:1 cocrystals a pH<sub>max</sub> occurs at K<sub>eu</sub> = 0.5. Both NVP-SAC and NVP-SLC cocrystals show K<sub>eu</sub> < 0.5 at pH 1.2 while K<sub>eu</sub> is > 0.5 for NVP-SAC at pH values  $\geq$  2.4, and for NVP-SLC at pH values  $\geq$  3.2, demonstrating that there is a pH<sub>max</sub> for both cocrystals. These results are in excellent agreement with those predicted from the solubility curves in Fig. 1. Small deviations in pH<sub>max</sub> for the NVP-SAC cocrystal where K<sub>eu</sub> = 0.4 suggests a pH<sub>max</sub> slightly higher than 1.1, estimated from Fig. 1. This small difference in pH<sub>max</sub> values is a consequence of the variability between predicted (Eq.1) and experimentally determined NVP solubility as a function of pH (shown in ESI<sup>+</sup>).

We have previously demonstrated that  $S_{cc}/S_{drug}$  can be estimated from  $K_{eu}$  according to  $^{2,\,20}$ :

$$K_{eu}^{1:1} = \left(\frac{S_{cocrystal}}{S_{drug}}\right)^2$$
(5)  
$$K_{eu}^{2:1} = 0.5 \left(\frac{S_{cocrystal}}{S_{drug}}\right)^3$$
(6)

 $S_{cc}$  and  $S_{drug}$  were experimentally determined from measured eutectic concentrations (Fig. 2) for each cocrystal and respective pH, as described in ESI<sup>+</sup>. The experimental and predicted  $K_{eu}$  dependence on  $S_{cc}/S_{drug}$  is presented in Fig. 3. The results show excellent agreement between observed and predicted behavior according to equations 5 and 6 for 1:1 and 2:1 cocrystals, respectively.

In conclusion, cocrystal solubility and its advantage over drug can be dialed up or down by solution pH. Cocrystal and drug solubilities without measurement of the corresponding pH will fail to provide meaningful insight about how cocrystals dissolve, and in some cases miss their ability to enhance and



Fig. 3 Predicted and experimental values of  $K_{eu}$  and cocrystal solubility advantage ( $S_{cc}/S_{drug}$ ) for 1:1 NVP-MLE and 2:1 NVP-SAC and NVP-SLC cocrystals.  $K_{eu}$  is a key indicator of  $S_{cc}/S_{drug}$ .  $K_{eu}$  dependence on pH reveals the cocrystal pH<sub>max</sub> as well as the cocrystal increase in solubility over drug as pH increases. At pH<sub>max</sub>,  $K_{eu} = 1$  for 1:1 cocrystals and  $K_{eu} = 0.5$  for 2:1 cocrystals. Log axes are used due to the large range of values. Symbols represent experimental values. Numbers next to data points indicate pH at eutectic point or equilibrium pH. Lines were generated according to equations 5 and 6. Solid lines represent 1:1 cocrystals and dashed lines 2:1 cocrystals.

modulate solubility. We have also demonstrated that eutectic constants are key indicators of cocrystal stability and solubility. Their measurement requires small amount of materials and time for a solution to reach equilibrium with.  $K_{eu}$  also provides a supersaturation index, which is the driving force for cocrystal transformation to the less soluble drug. A subsequent publication will address the influence of the supersaturation index on cocrystal dissolution.

We gratefully acknowledge partial support from CAPES-Brazil/PVE-Program. GK also acknowledges CAPES-Brazil/PDSE scholarship (process 7537/13-1). NRH and GK are grateful for partial support from the National Institute of General Medical Sciences of the National Institutes of Health (NIH) under award number R01GM107146. The content is solely the responsibility of the authors and does not necessarily represent the official views of the NIH.

#### Notes and references

- 1 S. J. Bethune, N. Huang, A. Jayasankar and N. Rodríguez-Hornedo, *Cryst Growth Des*, 2009, **9**, 3976-3988.
- 2 A. Alhalaweh, L. Roy, N. Rodríguez-Hornedo and S. P. Velaga, Mol Pharm, 2012, 9, 2605-2612.
- 3 L. S. Reddy, S. J. Bethune, J. W. Kampf and N. Rodríguez-Hornedo, *Cryst Growth Des*, 2009, **9**, 378-385.
- 4 N. Huang and N. Rodríguez-Hornedo, *Cryst Growth Des*, 2010, **10**, 2050-2053.
- 5 N. Huang and N. Rodríguez-Hornedo, J. Pharm. Sci., 2011, 100, 5219-5234.
- 6 M. P. Lipert and N. Rodríguez-Hornedo, *Mol Pharm*, 2015, 12, 3535-3546.
- 7 M. P. Lipert, L. Roy, S. L. Childs and N. Rodríguez-Hornedo, J. Pharm. Sci., 2015, 104, 4153-4163.
- P. M. Grob, J. C. Wu, K. A. Cohen, R. H. Ingraham, C. K. Shih,
  K. D. Hargrave, T. L. Mctague and V. J. Merluzzi, *Aids Res Hum Retrov*, 1992, 8, 145-152.
- 9 M. Sarkar, O. P. Perumal and R. Panchagnula, *Indian J Pharm Sci*, 2008, **70**, 619-630.
- M. R. Caira, S. A. Bourne, H. Samsodien, E. Engel, W. Liebenberg, N. Stieger and M. Aucamp, *Crystengcomm*, 2012, 14, 2541-2551.
- 11 D. J. Good and N. Rodríguez-Hornedo, *Cryst Growth Des*, 2009, **9**, 2252-2264.
- 12 F. Keramatnia, A. Shayanfar and A. Jouyban, J. Pharm. Sci., 2015, 104, 2559-2565.
- 13 *The Merck index*, Merck Research Laboratories, Whitehouse Station, NJ, 13th edn., 2001.
- 14 R. M. C. Dawson, *Data for biochemical research*, Clarendon Press, Oxford, 1959.
- 15 R. P. Bell and W. C. E. Higginson, Proceedings of the Royal Society of London Series a-Mathematical and Physical Sciences, 1949, **197**, 141-159.
- 16 A. Avdeef, Adv Drug Deliver Rev, 2007, 59, 568-590.
- 17 A. T. Serajuddin, Adv Drug Deliver Rev, 2007, 59, 603-616.
- 18 P. H. Stahl, C. G. Wermuth and International Union of Pure and Applied Chemistry., *Handbook of pharmaceutical salts* :

Journal Name

properties, selection, and use, Wiley-VCH, Weinheim, 2nd edn., 2011.

- B. G. Pereira, F. D. Fonte-Boa, J. A. L. C. Resende, C. B. Pinheiro, N. G. Fernandes, M. I. Yoshida and C. D. Vianna-Soares, *Cryst Growth Des*, 2007, 7, 2016-2023.
- 20 D. J. Good and N. Rodríguez-Hornedo, *Cryst Growth Des*, 2010, **10**, 1028-1032.